07718096

Application or Docket Number

Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)						MALL EN	ππν □	OR	OTHER SMALL			
TOTAL CLAIMS 15						RATE	FEE	· ·	RATE	FEE	1	
FOR		NUMBER FILED	NUMB	NUMBER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS		15 minus 20	= *	· Ø		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS		3 minus 3	= Ø	• Ø		X40=		OR	X80=		ı	
MULTIPLE DE	PENDENT CLAIM P	RESENT				+135=		OR	+270=		ı	
* if the differe	nce in column 1 is	less than zero, enter "0" in column 2		Ļ	TOTAL		OR		410	1		
	CLAIMS ÁS A	MENDED - PART II				OTHER THAN					1	
(Column 1) (Column 2)				(Column 3)	; 	SMALL E	ENTITY	OR	SMALL		1	
MA	CLAIMS REMAINING AFTER AMENDMENT	N PRE	IGHEST LUMBER EVIOUSLY AID FOR	PRESENT EXTRA	<b>.</b>	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total Co		Minus ••	15	- \	Ιſ	X\$ 9=		OR	X\$18=			
Total Independent		Minus ***	3.	= \ '		X40-		OR	X80=	7 1 1 3		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=	•		
1-6/64						TOTAL		ÒR	TOTAL			
(Column 2) (Column 3)							ADDIT. FEE ON ADDIT. FEE					
Total Independent	CLAIMS REMAINING AFTER AMENDMENT	R N PRE	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA	l٢	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total	- S	Minus	20	- 85·	1	X\$ 9=	766	OR	X\$18=			
Independe	ent •	Minus •••	B	- 17	<b>1</b>	X40-	17.20	OR	.X80=		1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											1	
	•				L	+135=	•	OR	+270= TOTAL			
			•		AC	DOIT. FEE		OR	ADDIT. FEE	10	1	
	(Column 1)	(Ce	olumn 2) IGHEST	(Column 3)		. • • • •			*		1	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	PRI	IIGHEST IUMBER EVIOUSLY VAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE:		
Total		Minus ++		E	JΓ	X\$ 9=		OR	X\$18= -			
Independ		Minus •••		-	1 t	X40=		OR	X80=		1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.135-	-1		+270=			
"If the Intry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						+135=- TOTAL DDIT. FEE		OR OR	TOTAL ADDIT. FEE		1	
"If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
FORM PTO-478  Palent and Tatalemark Office, U.S. DEPARTMENT OF COMMERCE											Ē.	

(Rev. 6/00)

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